

HURRICANE RESPONSE AND THE MILITARY HEALTH SYSTEM

By: Richard Searles, FHP&R Staff Writer

During an emergency, the Military Health System (MHS) is prepared to assist anytime, anywhere, with comprehensive medical capability to military operations, natural disasters and humanitarian crises around the globe.

In an event, such as a response to hurricanes Gustav and Ike, the MHS was there before, during and after the storm.

The MHS provides support to Emergency Support Function (ESF) #8, Health and Medical Services, which provides Federal assistance to supplement State and local resources in response to public health and medical care needs following a major disaster or emergency, or during a developing potential medical situation. Assistance provided under ESF #8 is directed by the Department of Health and Human Services. Resources are provided when State and local resources are overwhelmed and public health or medical assistance is requested.

Col. Donald Noah, Chief of Staff for Force Health Protection and Readiness, noted several MHS contributions:

- Leadership advice and guidance - A nationwide array of 14 Joint Regional Medical Plans officers (JRMPOs) exists. All available JRMPOs were mobilized to coordinate and synchronize state and Federal ESF-8 capabilities.
- Patient movement - Both within and outside the National Disaster Medical



System (NDMS), aeromedical evacuation units moved approximately 473 non-ambulatory patients out of danger.

- Medical support to general evacuation effort - The Air Force's San Antonio-based 59th Medical Wing provided medical screening and emergent care to thousands of people evacuated from hurricane landfall areas.
- Medical logistics - Through the emergency operations center in San Antonio, the right military medical materiel was provided to the right place at the right time.

Additionally, Col. Noah noted the Texas Military Forces, which were led in the medical context by Joint Surgeon Colonel (Dr.) Connie McNabb, proved capable of augmenting, and in many cases, replacing, Federal response assets. Personal initiative at all levels effectively

erased policy shortfalls and ensured patients were moved safely and quickly.

Col. Noah felt that the MHS response was excellent, but encouraged those involved to continue to strive for improvement.

"First, and perhaps most important, we need to ensure that our DoD response policies are coordinated with all agencies, both internal and external to DoD," he said.

"Operational communication between military medical response experts at all levels provided effective situational awareness," said Lt. Cmdr. Eric Timmens, Crisis Management Action Officer for Office of the Assistant Secretary of Defense (Health Affairs). "We were able to observe and support a large intricate response to Hurricanes Gustav and Ike by working closely with the Office of the Assistant Secretary of Defense, the Joint Staff, USNORTHCOM, USTRANSCOM as well as with our interagency partners, the Departments of Homeland Security and Health and Human Services. Only through cooperation and mutual respect was the MHS able to work most effectively to save lives."

"Disaster response is one of the most sacred duties entrusted to the MHS," said Timmens. "We take our duty very seriously because we truly feel we owe it to the American people to ensure that the dedicated professionals who comprise the MHS are prepared to assist anywhere, anytime."